

INFORMATION DISCLOSURE CITATION

(Use several sheets if necessary)



ATTY. DOCKET NO.
PD/4-32803A
APPLICATION NO.
Not Yet Known
APPLICANT
GRASSBERGER ET AL.
FILING DATE
Herewith

Group

U.S. PATENT DOCUMENTS

EXAMINER INITIAL		DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE
/FC/	AA	5,292,727	3/8/94	Godtfredsen			
	AB						
	AC						
	AD						
	AE						
	AF						
	AG						
	AH						
	AI						
	AJ						
	AK						
	AL						

FOREIGN PATENT DOCUMENTS

		DOCUMENT NUMBER	DATE	OFFICE	CLASS	SUBCLASS	TRANSLATION YES	NO
/FC/	AM	98/18468	5/7/98	WO			<input type="checkbox"/>	<input type="checkbox"/>
/FC/	AN	99/16745	4/8/99	WO			<input type="checkbox"/>	<input type="checkbox"/>
/FC/	AO	99/24036	5/20/99	WO			<input type="checkbox"/>	<input type="checkbox"/>
/FC/	AP	01/46132	6/28/01	WO			<input type="checkbox"/>	<input type="checkbox"/>
/FC/	AQ	02/064589	8/22/02	WO			<input type="checkbox"/>	<input type="checkbox"/>

OTHER DOCUMENTS (Including Author, Title, Date, Pertinent pages, Etc.)

/FC/	AR	Patent Abstracts of Japan, Vol. 1996, No. 03 (1996) and JP 7 291868 (11/7/95).
/FC/	AS	Patent Abstracts of Japan, Vol. 1995, No. 11 (1995) and JP 7 196515 (8/1/95).
/FC/	AT	Lewis, "Therapeutic Progress II: Treatment of Psoriasis", Journal of Clinical Pharmacy and Therapeutics, Vol. 19, No. 4, pp. 223-232 (1994).

EXAMINER

/Frank Choi/

DATE CONSIDERED

12/10/2007

*EXAMINER: Initial of reference considered, whether or not citation is in conformance with MPEP 609: Draw a line through citation if not in conformance and not considered. Include a copy of this form with the next communication to applicant.

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Sheet 2 of 2

ATTY. D.C. /ET NO.
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APR 10 2007

PA TENT & TRADEMARK OFFICE
U.S. DEPARTMENT OF COMMERCE

ONE OR SEVERAL SHEETS IF NECESSARY

FOREIGN PATENT DOCUMENTS

EXAMINER INITIAL		DOCUMENT NUMBER	DATE	OFFICE	CLASS	SUBCLASS	TRANSLATION YES <input type="checkbox"/> NO <input type="checkbox"/>
/FC/	CA	02/089796	11/14/02	WO			<input type="checkbox"/> <input type="checkbox"/>
/FC/	CB	02/094247	11/28/02	WO			<input type="checkbox"/> <input type="checkbox"/>
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